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PTO/SB/01 (12-97)

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## DECLARATION FOR UTILITY OR **DESIGN** PATENT APPLICATION (37 CFR 1.63)

OR

☐ Declaration Submitted with Initial Filing

Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)

Attorney Docket Number		K35A0568
First Named Inventor		DOUGLAS J. DURRANT
COMPLI	<u>ETE IF</u>	KNOWN
Application Number		09 / 541,137
Filing Date		March 31, 2000
Group Art Unit		2786
Examiner Name		Unknown

As a below named inven	As a below named inventor, I hereby declare that:							
My residence, post office	My residence, post office address, and citizenship are as stated below next to my name.							
I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:  METHOD AND SYSTEM FOR IDENTIFYING MANUFACTURING ANOMALIES IN A  MANUFACTURING SYSTEM								
the specification of which is attached hereto	) (Title	e of the Invention)						
OR was filed on (MM/D	D/YYYY) 03/31/	2000 as United	d States Applicat	ion Number or I	PCT International			
Application Number	09/541,137 and wa	as amended on (MM/DD/Y)	YYY)		(if applicable).			
amended by any amendme	eviewed and understand the ent specifically referred to about disclose information which is	ove.			claims, as			
I hereby claim foreign priori certificate, or 365(a) of any America, listed below and ha or of any PCT international a	PCT international applications are also identified below, by	n which designated at lea checking the box, any forei	st one country on application fo	other than the l r patent or inver	Jnited States of			
Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Co YES	opy Attached? NO			
Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:								
I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.								
Application Number		(MM/DD/YYYY)						
	(s) Fliing Date	, (m.122)	numbe supple	onal provisiona ers are listed c emental priorit SB/02B attach	on a y data sheet			

[Page 1 of 2]
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JUN 3 0 2000

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# DECLARATION — Utility or Design Patent Application

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United States United States information wh	of Americ or PCT In iich is ma	fit under 35 U.S ca, listed below ternational app terial to patent: international fil	and, instication in ability as	ofar as the the mann defined in	ne subj ner pro n 37 C	ect matter vided by the FR 1.56 wh	of each	of the	e claims of the	is applica C. 112. l	ation is acknov	not disclosed wledge the duty	in the prior to disclose
U.	S. Pare	ent Applicat Num		PCT Pa	arent		Parent Filing Date (MM/DD/YYYY)					ent Patent N (if applicab	
							•					,	
☐ Additional	U.S. or F	PCT internationa	al applica	tion numb	ers ar	e listed on a	a suppler	nenta	al priority data	sheet P1	O/SB/	02B attached h	ereto.
As a named inv and Trademark		ereby appoint to onnected therev	vith:	Custome OR	r Numi	ber				<b></b>	• [	ct all business  Place Custo  Number Bar  Label he	omer Code
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M		i. Shara				367			Ivan M.	Pose	у		865
Additional registered practitioner(s) named on supplemental Registered Practitioner Information sheet PTO/SB/02C attached hereto.													
Direct all corr			Custom	ner Numb Code Lal	oer				OR			ondence add	
Name	Milad	d G. Shara											
Address	WES	TERN DIGI	TAL CO	ORPOR	ATIC	N							
Address	8105	Irvine Cent	er Drive	e, Plaza	3								
City	Irvin						State	e (	California	ZIP	926	518	
Country	U.S.	Α.		Tele	phon	e (	949) 9	32-5	676	Fax	(94	9) 932-5633	3
believed to be punishable by	true; and fine or in	I statements m d further that th nprisonment, o t issued thereor	nese state r both, u	ements w	ere m	ade with th	e knowle	edge	that willful fa	lse state	ments	and the like se	made are
Name of So	ole or F	irst Invento	or:				ПАр	etitic	on has been	filed for	this u	ınsigned inve	ntor
Gi	ven Nar	ne (first and r	niddle [if	f any])		1			Family	v Name	or Su	rname	-
DOUGLAS		A		<u>-</u>			DURF	RAN	T				
Inventor's Signature		W.			4							Date	4.17.00
Residence: (	City	мізвіой	/IEJO	s	tate	CA	Cou	ntry		JSA		Citizenship	USA
Post Office A	ddress	24061 CAS	STILLA	LANE									
Post Office A	ddress			,									
City		MISSION VIEJO	State	C	A	ZIP		92	:691	Cour	ntry	US	A
Additional	invento	rs are being r	named o	n the	1 sur	plementa	l Additio	onal	Inventor(s)	sheet(s)	PTO/	SB/02A attac	hed hereto

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# **DECLARATION**

Under the Paperwork Reduction valid OMB control number.

## **ADDITIONAL INVENTOR(S)** Supplemental Sheet Page 1 of 1

Name of Addition	Name of Additional Joint Inventor, if any:										
Given Na	me (first and middle [if any	])					Family Nar	ne or S	umame		
BRUCE E.	BRUCE E. ALDRIDGE										
Inventor's Signature	Ruce E.	ae	dn	idg.					<i>4/17/</i> Date	00	
Residence: City	OCEANSIDE	Sta		CA	Co	untry	USA		Citizens	hip	USA
Post Office Address	1435 CALLE MARBEL	.LA									
Post Office Address									_		
City	OCEANSIDE	Sta	te	CA	z	IP.	92056	Country	,	US	SA
Name of Additional Joint Inventor, if any:  A petition has been filed for this unsigned inventor											
Given Name (first and middle [if any]) Family Name or Surname											
ROSS E. GOUGH											
Inventor's Signature	Posts So	Qy	Z						4/17/ Da	دم/ te	
Residence: City	FOOTHILL FIANCH	Sta	c	A	Co	untry	USA		Citize	nship	USA
Post Office Address	15 LA SOLITA										
Post Office Address										-	
City	FOOTHILL RANCH	l Sta	te (	CA		ZIP	92610	Coun	try (	JSA	
Name of Addition	nal Joint Inventor, if ar	ıy:			] A	petition	n has been file	d for thi	s unsigr	ned inv	entor
Given Na	me (first and middle [if any	)				-	Family Nar	ne or S	umame		
Inventor's Signature									Da	te	
Residence: City	State Country Citizenship										
Post Office Address						_					
Post Office Address											
City		State				ZIP		C	ountry	_	

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### **FEE TRANSMITTAL**

Note: Effective October 1, 1997. Patent fees are subject to annual revision.

690.00 TOTAL AMOUNT OF PAYMENT (\$)

Complete if Known				
Application Number	UNKNOWN			
Filing Date	HEREWITH			
First Named Inventor	DOUGLAS J. DURRANT			
Group Art Unit	UNKNOWN			
Examiner Name	UNKNOWN			
Attorney Docket Number	K35A0568			

METHOD OF PAYMENT (check one)	FEE CALCULATION (continued)						
1.  The Commissioner is hereby authorized to charge indicated fees and credit any over payments to:	ADDITIONAL FEES  Large Entity Small Entity Fee Fee Fee Fee Code (\$) Code (\$)  Fee Description	Fee Paid					
Deposit Account Number	105 130 205 65 Surcharge - late filing fee or oath						
Deposit Account Name WESTERN DIGITAL CORPORATION	127 50 227 25 Surcharge - late provisional filing fee or cover sheet.						
Charge Any Additional Charge the Issue Fee Set in	139 130 139 130 Non-English specification						
Fee Required Under 37 CFR 1.18 at the Mailing of the Notice of Allowance	147 2,520 147 2,520 For filing a request for reexamination						
	112 920* 112 920* Requesting publication of SIR prior to Examiner action						
2. Payment Enclosed: Check Money Other	113 1,840* 113 1,840* Requesting publication of SIR after Examiner action						
FEE CALCULATION	115 110 215 55 Extension for reply within first month						
FEE CALCULATION	116 380 216 190 Extension for reply within second month						
1. FILING FEE	117 870 217 435 Extension for reply within third month						
Large Entity Small Entity	118 1,360 218 680 Extension for reply within fourth month						
Fee Fee Fee Fee Description Fee Paid Code (\$) Code (\$)	128 1,850 228 925 Extension for reply within fifth month						
101 690 201 345 Utility filing fee 690.00	119 300 219 150 Notice of Appeal						
106 310 206 155 Design filling fee	120 300 220 150 Filing a brief in support of an appeal						
107 480 207 240 Plant filing fee	121 260 221 130 Request for oral hearing						
108 690 208 345 Reissue filing fee	138 1,510 138 1,510 Petition to institute a public use proceeding						
114 150 214 75 Provisional filing fee	140 110 240 55 Petition to revive - unavoidable						
SUBTOTAL (1) (\$) 690.00	141 1,210 241 660 Petition to revive - unintentional						
Footname	142 1,210 242 605 Utility issue fee (or reissue)						
2. CLAIMS Extra Fee from Fee Paid	143 430 243 215 Design issue fee						
Total Claims 12 -20 = 0 X 18 = 0.00 Independent 2 -3 - 0 X 78 = 0.00	144 580 244 290 Plant issue fee						
Claims	122 130 122 130 Petitions to the Commissioner						
Multiple Dependent Claims X X = =	123 50 123 50 Petitions related to provisional applications						
Large Entity Small Entity	126 240 126 240 Submission of Information Disclosure Stmt						
Fee Fee Fee Fee Description Code (\$)	581 40 581 40 Recording each patent assignment per property (times number of properties)						
103 18 203 9 Claims in excess of 20	146 690 246 345 Filing a submission after final rejection (37 CFR 1.129(a))						
102 78 202 39 Independent claims in excess of 3	149 690 249 345 For each additional invention to be						
104 260 204 130 Multiple dependent claim 109 78 209 39 Reissue independent claims	examined (37 CFR 1.129(b))						
over original patent	Other fee (specify)						
110 18 210 9 Reissue claims in excess of 20 and over original patent	Other fee (specify)						
SUBTOTAL (2) (\$) 0.00	Reduced by Basic Filing Fee Paid SUBTOTAL (3) (\$)						

SUBMITTED B	Υ		Complete (if	applicable)
Typed or Printed Name	Milad G. Shara, Esq.		Reg. Number	39,367
Signature	MADIL	Date 3/31/00	Deposit Account User ID	

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Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

(IPE)	<b>(</b>		Application Number	09/541,137
JUN 3 0 2000	TRANSMIT	Γ <b>AL</b>	Filing Date	03-31-2000
	FORM		First Named Inventor	Douglas J. Durrant
TRADEMARY	(to be used for all correspondence aft	er initial filing)	Group Art Unit	2786
			Examiner Name	Unknown
	Total Number of Pages in This Subm	nission 13	Attorney Docket Number	K35A0568
		ENCLOS	SURES (check all that app	nly)
	Fee Transmittal Form Fee Attached  Amendment / Response After Final Affidavits/declaration(s)  Extension of Time Request  Express Abandonment Request  Information Disclosure Statemen  Certified Copy of Priority Document(s)  Response to Missing Parts/ Incomplete Application  Response to Missing Parts under 37 CFR 1.52 or 1.53	Drawing  Licensin  Petition and Acc  To Conv Provisio  Power of Change Address  Termina  Small Ed	ng-related Papers  Routing Slip (PTO/SB/69) companying Petition  vert a nal Application of Attorney, Revocation of Correspondence	After Allowance Communication to Group  Appeal Communication to Board of Appeals and Interferences  Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)  Proprietary Information  Status Letter  Additional Enclosure(s) (please identify below):  Declaration Utility Application Recordation Form Bibliographic Form Notice To File Missing Parts Postcard
	SIGNATU	JRE OF APPLI	CANT, ATTORNEY, OR A	AGENT
,	Firm	IGITAL COI	RPORATION - Mila	d G. Shara, 39,367
			ATE OF MAILING	
	I hereby certify that this correspondence envelope addressed to: Assistant Com			
	Typed or printed name Adriana Val	rela		-

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Date

Signature

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Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE on sare required to respond to a collection of information unless it displays a valid OMB control number.

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#### **FEE TRANSMITTAL**

Note: Effective October 1, 1997. Patent fees are subject to annual revision.

170.00 TOTAL AMOUNT OF PAYMENT

Complete if Known					
Application Number	09/541,137				
Filing Date	03-31-2000				
First Named Inventor	DOUGLAS J. DURRANT				
Group Art Unit	2786				
Examiner Name	UNKNOWN				
Attorney Docket Number	K35A0568				

METHOD OF PAYMENT (check one)	METHOD OF PAYMENT (check one) FEE CALCULATION (continued)					
1. The Commissioner is hereby authorized to characteristic indicated fees and credit any over payments to Deposit	8 ADDITIONAL FEES Large Entity Small Entity Fee Fee Fee Fee Code (\$) Code (\$) Fee Description	Fee Paid				
Account Number 23-1209	105 130 205 65 Surcharge - late filing fee or oath	130.00				
Deposit Account Name WESTERN DIGITAL CORPORAT	N 127 50 227 25 Surcharge - late provisional filing fee or cover sheet.					
Charge Any Additional Charge the Issue Fee Set in	139 130 139 130 Non-English specification					
Fee Required Under 37 CFR 1.18 at the Mailing 37 CFR 1.16 and 1.17 Notice of Allowance	147 2,520 147 2,520 For filing a request for reexamination					
	112 920* 112 920* Requesting publication of SIR prior to Examiner action					
2. Payment Enclosed:  Check Money Other	113 1,840* 113 1,840* Requesting publication of SIR after Examiner action					
	115 110 215 55 Extension for reply within first month					
FEE CALCULATION	116 380 216 190 Extension for reply within second month					
1. FILING FEE	117 870 217 435 Extension for reply within third month					
Large Entity Small Entity	118 1,360 218 680 Extension for reply within fourth month					
Fee Fee Fee Fee Description Fee Code (\$) Code (\$)	120 1,030 220 323 =					
101 690 201 345 Utility filing fee	119 300 219 150 Notice of Appeal					
106 310 206 155 Design filing fee	120 300 220 150 Filing a brief in support of an appeal					
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108 690 208 345 Reissue filing fee	138 1.510 138 1.510 Petition to institute a public use proceeding	gi				
114 150 214 75 Provisional filing fee	140 110 240 55 Petition to revive - unavoidable					
SUBTOTAL (1) (\$)	141 1,210 241 660 Petition to revive - unintentional					
( ) [(+/	142 1,210 242 605 Utility issue fee (or reissue)	:				
2. CLAIMS Fee from Fee I	id 143 430 243 215 Design issue fee	ļ				
Total Claims -20 = 0 X 18 =	144 580 244 290 Plant issue fee	<del></del>				
Independent - 3 = 0 y 78 -	122 130 122 130 Petitions to the Commissioner					
Claims Multiple Dependent Claims X	123 50 123 50 Petitions related to provisional applications	,				
Large Entity Could Entity	126 240 126 240 Submission of Information Disclosure Stmt					
Large Entity Small Entity Fee Fee Fee Fee Fee Description Code (\$) Code (\$)	581 40 581 40 Recording each patent assignment per property (times number of properties)	40.00				
103 18 203 9 Claims in excess of 20 102 78 202 39 Independent claims in excess	146 690 246 345 Filing a submission after final rejection (37 CFR 1.129(a))					
102 78 202 39 Independent claims in excess 104 260 204 130 Multiple dependent claim	149 690 249 345 For each additional invention to be					
109 78 209 39 Reissue independent claims	examined (37 CFR 1.129(b))					
over original patent	Other fee (specify)	+				
110 18 210 9 Reissue claims in excess of 2 and over original patent	Other fee (specify)					
SUBTOTAL (2) (\$)	Reduced by Basic Filing Fee Paid SUBTOTAL (3) (\$)	170.00				
SUBMITTED BY	Complete (if app	olicable)				
Typed or Printed Name Milad a. Shara, Es	Reg. Number	39,367				
Signature Marie	Date 6/26/ou Deposit Account User ID					

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Postal or Zip Code jijn 3 0 2000 City of Residence Citizenship::

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92618 (949) 932-5676

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(949) 932-5633

E-Mail::

Milad.G.Shara@wdc.com

#### **Application Information**

Title Line One ::

METHOD AND SYSTEM FOR IDENTIFYING MANUFACTURING ANOMALIES

Title Line Two::

IN A MANUFACTURING SYSTEM

Formal Drawings:: Application Type ::

Yes Utility K35A0568

Docket Number :: Licensed - U S Government Agency :: Contract Number ::

N/A N/A

Grant Number:: Secrecy Order in Parent Application :: N/A N/A

#### **Representative Information**

Representative Customer Number One::

Milad G. Shara, Esq.

Registration Number One ::

39,367

Representative Customer Number Two::

Ivan M. Posey, Esq.

Registration Number Two::

43,865